



INFORMATION FORM FOR CONSENT
JAW/FACE & DENTAL IMPLANT (ARTIFICIAL MATERIAL) APPLICATION SURGERY

The purpose of this form is to make you aware of issues related to your health and to ensure your participation in the decision to be taken. You may refuse to be informed except in cases of legal and medical necessity.

While this form is designed to meet the needs of most patients in most circumstances, it should not be considered a document that covers the risks of all forms of treatment. Depending on your personal health situation, your doctor may give you different or additional information.

Once you have learned about the benefits and possible risks of diagnosis, medical treatment and surgical interventions, it is up to you to decide whether or not to accept the procedures.

Transaction Description

In order to correct deficiencies, irregularities and deformities, sometimes functional disorders, especially in the bone and cartilage structure of the face, tissues from the human body are generally preferred. However, due to its disadvantages such as causing deficiency and additional scarring in the area taken, being difficult to shape, melting of a part of it in the place where it is placed and not predicting how much of it will melt, prolonging the operation time, sometimes it may be necessary to use artificial (alloplastic) materials preferably due to its advantages such as being easy to obtain, easy to shape or ready in the desired shape and remaining the same throughout life, shortening the operation time.

Artificial (alloplastic) materials used as implants are required to provide aesthetic appearance by filling bone and cartilage deficiencies in the face or to provide function in places such as eyelids and jaw joints. These materials contain various chemical structures and must be biocompatible (tissue compatible), non-toxic (no harm to human health) and unchanged over time. Many materials with these properties or very close to these properties have been produced and some of them have been authorized for human use. There is no guarantee that these materials, which have not been found to have significant harm and side effects to date, will be harmless in the future, and there are many risks associated with the application (implantation) of alloplastic materials.

Risks Related to Implant Application

- Swelling is expected in the implanted area. However, if this is due to blood collection (hematoma), it may need to be drained with minor intervention.
- The implant may slip out of place, resulting in asymmetry, or it may be necessary to remove the implant.
- **Infection;** If infection (inflammation) develops in the implanted area, swelling, pain and redness occur in that area. The infection may go away with medication, but if it does not go away or if it recurs several times, it may be necessary to remove the implant.
- It is very rare for **the implant to come out for** no other reason. If part of the implant comes out, it is necessary to remove it completely.
- There may be a subtle weakening of the bone on which the implant is placed over many years.
- Poor outcome; the postoperative result may not satisfy you. Visible and palpable defects, changes in the sensation of a certain area, loss of function and structural defects may occur. You may feel disappointed that the result does not meet your expectations.
- You will feel the implant as different from your own tissue. Even if you have a good appearance, it is expected that you will feel the difference in your hand.

Hospital Routines for Surgery

- If necessary, new records will be taken to determine the final details of your treatment. New pictures, models, x-rays, and video images are completed a few days or weeks before surgery.
- Before the operation, the last details about the surgery will be discussed and any questions you want to ask will be answered. Your physical examination is also completed.
- You will be given a day to come to the hospital, you will be called to the hospital early in the morning on an empty stomach, it is appropriate to take a shower in the morning. Blood will be taken for pre-operative tests.
- After the operation, you can stay in the recovery room until you wake up. After recovery, you will be taken to your room on the floor.
- Your mouth may swell and blood may leak from the incision sites in your mouth, possibly in the first 24 hours. There will be swelling and bruising on your face and cheeks. These swellings and bruises may be very large depending on the



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procedures performed during the surgery and sometimes on the characteristics of the person. To prevent some of the swelling in your mouth and cheeks, you may need to sleep with 2-3 pillows at night to elevate your head.

- You can usually be discharged within 1 or 2 days after surgery. This depends on how you feel. In some cases you may even be discharged on the same day.
- The implanted area is usually rested. This must be done very carefully. It is very important for success that you avoid movements that are not authorized by your physician, and that you do not touch or lie on the implanted area.
- If the implant is placed in the jaws and the jaw bones are also interfered with, it may be necessary to use braces and/or wires and often plastic splints to attach to your teeth. These tools are used to immobilize your teeth and jaw, position them correctly and protect the surgical site to allow you to heal. The need for splints can vary and can be discussed before surgery. None of this may be necessary when only implants are used. Oral hygiene accelerates healing and is extremely important. Please rinse your mouth with plenty of water after each meal and then rinse your mouth again with the medication or disinfectant solution provided as described. After 3-4 days, brush gently with a children's toothbrush (small and soft) to clean your teeth and braces. Make sure you stay away from the incision sites on your gums.
- Diet plays an important role in your postoperative care. With implants placed in the jaw, it may be necessary to eat without chewing for about 10 weeks. For at least the first 7-10 days after surgery, you should only eat liquid foods. Your physician will inform you when you will be switched to a non-chewy diet and for how long you will continue with it. Continuing with a non-chewing diet is very important for the healing of the bone grafted area and/or the jaw. Excessive movements in this area can disrupt the healing process. Your physician will also help you with nutritional recommendations. Remember that sweeteners and flavors are of great importance as they change the normal appearance of food. Do not hesitate to try different spices. Avoid irritating spices such as green pepper and hot sauces. If you are preparing seafood, remember that these dishes should be eaten the day they are prepared.
- We recommend that you dilute a special solution and use it for 7-10 days, rinsing the mouth throughout the day to clean the mouth. In addition, saline, half diluted oxygenated water (hydrogen peroxide), or half diluted mouthwash with both saline and salt water will enhance healing and help minimize the number of bacteria in your mouth. It is very important that you use these mouthwashes. You should always use them after every meal. You should also regularly apply petroleum jelly or a petroleum jelly cream to your lips.
- Take your postoperative medication as prescribed. It is very important to take your medication to prevent infection.
- The stitches in your mouth are dissolvable. They do not require any special care except keeping them clean. Again, it is very important to keep the inside of your mouth clean to prevent bacteria from sticking to the stitches. If there are stitches in the skin, they are usually removed in 5-7 days.
- When you return to school, you can do your normal activities other than physical education classes. For 3 months you will not be allowed to participate in sports. If you would like a document about this, please ask your doctor.
- If your jaws are tied together, you should have a wire cutter and rubber scissors at home. If you experience nausea or shortness of breath while your mouth is locked (intermaxillary fixation), you may need to cut the elastics and wires immediately.
- It will take some time for the swelling in your mouth to go down. Don't be surprised that after 3 months they are still there. If you spit some out, this is normal and nothing to worry about.
- Be as relaxed and quiet as possible, you can stand up to walk around the house. But you should never carry heavy objects. Your head should always be elevated at the level of your heart. For 10 days you should never bend over.
- Post-operative depression (feeling bad about oneself due to low mood) is common after any type of surgery. This depression is usually related to post-operative feelings of discomfort and fear with appearance and restriction of activity and movement. These feelings will disappear as your appearance improves and you return to your normal activities.

Possible Risks and Complications in Surgery (Poor Results, Side Effects)

As with other surgeries, jaw surgeries carry certain risks. These can be simple risks or they can be fatal. It is very important that you understand some of the risks that may develop after orthognathic surgery (surgery to create a more aesthetic appearance on the face).

Surgery and Other Procedures

An incision will be made through the mouth or through the skin to reach the deformed area. This incision can be from an old wound or far away from the deformed area. Also, taking bone or tissue from elsewhere if necessary, it may be necessary to make an incision elsewhere. After the implant is placed, it will be fixed using one or more of the following:



T.C. ERCİYES UNIVERSITY
DENTISTRY
APPLICATION AND RESEARCH HOSPITAL

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- Titanium plates and/or screws
- Customized or fabricated chrome-cobalt prostheses
- Fusible plates and/or screws
- Wire stitches
- Metal arches and wires applied to teeth
- External fixator (externally applied fixation device).
- Bone taken from elsewhere
- Bone, cartilage, bone paste, bone powder taken from another person
- Alloplastic materials such as silicone, porous hydroxyapatite, methyl methacrylate, titanium mesh

If they do not cause any problems, they will stay in place for life. If there are problems, a second operation may be needed to remove them. Depending on their position, they may also need to be removed.

The lower jaw and upper jaw can be locked (intermaxillary fixation) for 7-10 days after the end of the operation or later, during which time only watery foods should be eaten. If there is difficulty breathing or nausea, the elastics applied for fixation can be cut.

Additional Surgical Procedures that may be required

There are also different conditions that can affect early and late outcomes. There may be other risks and complications (negative outcomes), but these are much rarer. If complications develop, additional treatments or surgery may be required. There is no certainty in medicine and surgery. Although good results are expected, no guarantees or assurances can be given about the results that can be achieved.

I have read all of the above information and I have been given a lot of other verbal information.

I DECLARE THAT I AM SATISFIED WITH THE ORAL AND WRITTEN EXPLANATIONS GIVEN TO ME. I VOLUNTARILY AND VOLUNTARILY CONSENT TO THE TREATMENT OR OPERATION TO BE PERFORMED, TO ALL TREATMENTS TO BE CARRIED OUT IN CASE OF SUBSEQUENT CONDITIONS, TO THE ORAL AND WRITTEN EXPLANATIONS LISTED ABOVE AND NOT LIMITED TO THESE, AND I WANT THIS TREATMENT.

The patient/ patient's legal representative:

Name Surname:

Date of Birth:

Signature